



8-29-05

BAF/HW

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|--|------------------------------|-------------------------|------------------------------|--|
| AMENDMENT TRANSMITTAL LETTER | | | Docket No. PKZ-035CPA2CN2 | |
| Application No. 10/629340-Conf. #6345 | Filing Date July 28, 2003 | Examiner L. N. Leary | Art Unit 1654 | |

Applicant(s): Margret OETHINGER *et al.*

Invention: METHODS OF REDUCING MICROBIAL RESISTANCE TO DRUGS


TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

| CLAIMS AS AMENDED | | | | | |
|---|----------------------------------|--------------------------------|-----------------------------|------|---------------|
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 27 | - 27 = | | x | |
| Independent Claims | 3 | - 6 = | | x | |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): Extension for response within first month; Statutory Disclaimer | | | | | 125.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 125.00 |

- ☐ Large Entity ☒ Small Entity
- ☐ No additional fee is required for this amendment.
- ☒ Please charge Deposit Account No. 12-0080 in the amount of \$ 125.00.
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-0080 as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


Megan E. Williams
Attorney Reg. No.: 43,270

Dated: August 26, 2005

LAHIVE & COCKFIELD, LLP
28 State Street
Boston, Massachusetts 02109
(617) 227-7400

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 914047271 US, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 26, 2005

Signature:  (Megan E. Williams)



| | | | |
|---|--|--------------------------|-----------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005 | | Complete if Known | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | 10/629340-Conf. #6345 |
| TOTAL AMOUNT OF PAYMENT (\$) | | Filing Date | July 28, 2003 |
| 125.00 | | First Named Inventor | Margret OETHINGER |
| | | Examiner Name | L. N. Leary |
| | | Art Unit | 1654 |
| | | Attorney Docket No. | PKZ-035CPA2CN2 |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

Total Claims 27 - 27 = 0 **Extra Claims** 0 **Fee (\$)** 0 **Fee Paid (\$)** 0

Indep. Claims 3 - 6 = 0 **Extra Claims** 0 **Fee (\$)** 0 **Fee Paid (\$)** 0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| <u>27</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |

4. OTHER FEE(S)

| | Fees Paid (\$) |
|---|----------------|
| Non-English Specification, \$130 fee (no small entity discount) | |
| Other (e.g., late filing surcharge): 2251 Extension for response within first month | 60.00 |
| 2814 Statutory Disclaimer | 65.00 |

| | | | |
|---------------------|-----------------------|-----------------------------------|-----------------|
| SUBMITTED BY | | | |
| Signature | <u>Meg E Williams</u> | Registration No. (Attorney/Agent) | 43,270 |
| Name (Print/Type) | Megan E. Williams | Telephone | (617) 227-7400 |
| | | Date | August 26, 2005 |

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Dated: August 26, 2005 Signature: Meg E Williams (Megan E. Williams)